PTO/SB/22 (12-04)
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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)			Docket Number (Optional) 0020-4771P		
Application Number	09/701,303	_	Filed N	ovember 28, 2000	
For CONTROLLED RELEASE PREPARATIONS HAVING MULTI-LAYER STRUCTURE					
Art Unit 1615			Examiner	J. M. Spear	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application. The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):					
The requested extension and fee are	·				
One month (37 CFR 1.1)	· ·	<u>Fee</u> \$120	Small Entity Fe \$60	<u>ee</u> \$	
X Two months (37 CFR 1.		\$450	\$225	\$ 450.00	
Three months (37 CFR 1	, , , , , ,	51020	\$510	\$	
Four months (37 CFR 1.		1590	\$795	\$	
Five months (37 CFR 1.		2160	\$1080	\$	
Applicant claims small entity status. See 37 CFR 1.27. X A check in the amount of the fee is enclosed.					
Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account.					
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number02-2448 I have enclosed a duplicate copy of this sheet.					
I am the applicant/inventor.					
assignee of record of the entire interest. See 37 CFR 3.71.					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
attorney or agent of record. Registration Number					
attorney or agent under 37 CFR 1.34. Registration and Re			32.881		
John Son		.1111.	6 2005		
Signature		Date			
John W. Bailey		(703) 205-8000			
Typed or printed name			Telephone Number		
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
Total of 1 forms are submitted.					

07/08/2005 HALI11 00000070 09701303

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